

SHEPHERD UNIVERSITY
Department of Nursing Education
P.O. Box 5000
Shepherdstown, WV 25443-5000
(304) 876-5341

<http://www.shepherd.edu/nurseweb/>

BACHELOR OF SCIENCE IN NURSING (BSN) PROGRAM APPLICATION FOR ADMISSION

APPLICATION DEADLINES

Students are admitted to the BSN Program in the Fall Semester or Spring Semester. The deadlines for submitting an application to the Department of Nursing Education along with your Detail Degree Evaluation and completing an advisement interview are:

Admission in Fall Semester – March 1

Admission in Spring Semester – October 1

ADMISSION CRITERIA

Students become candidates for admission into the nursing program in their sophomore year upon meeting the following criteria.

1. Admission to Shepherd University is required before being accepted to the nursing program;
2. Submit official transcript(s) to the Admissions Office to have a Detailed Degree Evaluation completed by the deadline above;
3. Until admitted to the BSN Program, nursing majors will be designated as “pre-acceptance” and will be advised by nursing faculty members;
4. Eligibility to complete the 59 lower-division course hours as identified in the pre-nursing curriculum prior to matriculation;
5. Completion of NURS 310 Lifespan Health Promotion in Nursing before the beginning of the semester you are applying for;
6. Cumulative GPA of 2.7;
7. Must achieve grade C or above in the following courses: BIOL 225/BIOL 227, BIOL 226/BIOL 228, BIOL 302, CHEM 120/CHEM120L; CHEM 122/122L, NURS 310, statistics and all math courses;
8. Submit a Department of Nursing Education application for admission; and
9. Meet with academic advisor **prior to March 1** for intended enrollment in the Fall Semester or **prior to October 1** for intended enrollment in the Spring Semester. Transfer students may schedule an appointment with the Director of Nursing Education.

Refer to the Department of Nursing Education website on-line at <http://www.shepherd.edu/nurseweb/> for changes to admission criteria.

APPLICATION

Name _____ Student I.D. Number _____
(Last) (First) (Middle)

Are any of your education records in another name? If so, please indicate _____

Mailing Address _____
(Number and Street or P.O. Box)

(City or Town) (State) (Zip Code)

Home Phone Number _____ Cell Phone Number _____

E-mail Address _____

Permanent resident of _____ since _____
(State) (Date)

Applying for admission in Fall Semester, 20__ Spring Semester, 20__

Are you currently enrolled at Shepherd University?

- Yes If "yes", please give date _____
 No If "no", you must apply for admission prior to being accepted to the
Department of Nursing Education.

Have you taken courses at another college or university? Yes No

If yes, you must have a transfer evaluation completed by the application deadline. Have you submitted a copy of your official transcripts to the Admissions Office? Yes No

Are you currently or formerly licensed as an:

- LPN (list state) _____
 Certified Nursing Assistant (list state) _____
 Certified Medication Assistant (list state) _____
 Paramedic (list state) _____
 Emergency Medical Technician (list state) _____
 Other (list state) _____

COLLEGE OR VOCATIONAL SCHOOL (list all institutions attended)

School	Address	Dates Attended	GPA	Degree
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PERSONAL STATEMENT: Answer the following questions in your own words.

What does nursing mean to you?

What are your career goals?

Have you ever been placed on academic probation, suspended, dismissed, or asked to withdraw from any education institution?

Yes No **If “yes”, provide a written explanation on separate sheet.**

Have you ever been convicted of a felony or other offenses?

Yes No **If “yes”, provide a written explanation on separate sheet.**

HEALTH STATUS: Do you have a physical, mental, or emotional health problem of which the Department of Nursing Education should be aware? Yes No

If “yes”, please describe _____

I certify that the information I have provided in this application is accurate.

Signature _____

Date _____